Above Space Reserved for Recording
[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.] 26,2006 Date of this Document: April Reference Number of Any Related Documents: Grantor: Lester M. Sisson Name 26 Gin St Street Address AR 72532 Evening Smde Grantee: James Dor Louise Name Street Address SOII Southaven Circle W City/State/Zip Southaven, MS 38671 Abbreviated Legal Description (i.e., lot, block, plat or section, township, range, quarter/quarter or unit, building and condo name): Lot 343 Section B. Lake DITHE HILLS SUBDIVISION IN Section 19 Township 3 South Runge 9 West, as per Diar thereof of record in Diat book 2, at pages 30.36, in the office of the Abancery Clerk of Descrip County Mississippi.

Assessor's Property Tax Parcel/Account Number(s): THIS QUITCLAIM DEED, executed this 26TH d 20<u>06</u>, by first party, Grantor, <u>Lester M. Sisson</u> mailing address is 266 m St. Evening Shade, Ale 72S second party, Grantee, <u>James Dor Lours</u> H. White aker day of 72532 whose mailing address is 8011 Southwen Circle W. Southwen MS 38671 WITNESSETH that the said first party, for good consideration and for the sum of FIVE HUNDRED) paid by the said second party, the receipt whereof is hereby acknowledged, Dollars (\$ 500 does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim,

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LFZ98-1 + Rev. 05/05

James Whitaker see back

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a

which the said first party has in and to the following o	described pare	el of land, and imp	provements and a	ppurtenances
thereto in the County of DESCHO				
to wit:				
IN WITNESS WHEREOF, the said first party has signed a sealed and delivered in the presence of:	and sealed thes	e presents the day ar	nd year first writter	n above. Signed,
Signature of Witness			<u>.</u>	
Print Name of Witness				
Signature of Witness				
Print Name of Witness	-			
Signature of Grantor X Leste M Print Name of Grantor X Lestes M	Six 5350			
Onlori Doth 2004 before appeared 1858 of satisfactory evidence) to be the instrument and acknowledged to me that he she/the and that by his/her/their signature(s) on the instrument person(s) acted, executed the instrument.	e person(s) wr ey executed th	iose name(s) is/are e same in his/her/ti	heir authorized ca	apacity(ies),
WITNESS my hand and official seal. (C) EDawis Charcere	<u>, clert</u>	2		
Signature of Notary By: musty J.		20,°C		
AffiantKnownProduced ID Type of IDDriver'SLicenseS (Seal)		ALKON!	1310	
Prepared by and grav Lester M. Sisson 26 Gin St Evening Shade, AR 7253		8011 50	D WHI UTHAVE	TTAKER EN CR.W, 15,3867/
870-266-3775 870-307-5318 WWW.SOCTATES.COM	Page 2 of 2	662-39 662 40	3-888	2